## This Page Is Inserted by IFW Operations and is not a part of the Official Record

## **BEST AVAILABLE IMAGES**

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

## IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

TTORNEY DOCKET NO. 200312527-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

	names invent	are listed below) of th on entitled:		nich is claimed and for which a
the specification of wh	ich is a	ttached hereto unless th	ne following box is c	hecked:
(X) was filed on N			_	ternational Application
Number 10/71		<del></del> ''	ed on	• •
	s amen	ded by any amendmen	t(s) referred to above	a above-identified specification, ve. I acknowledge the duty to CFR 1.56.
Foreign Application(s) and/or	Claim of	Foreign Priority		
inventor(s) certificate listed b	elow and		ny foreign application for	any foreign application(s) for patent or r patent or inventor(s) certificate having
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
				YES: NO:
				YES: NO:
Provisional Application	<del></del>	· · · · · · · · · · · · · · · · · · ·		
I hereby claim the benefit unbelow:	nder Title	35, United States Code Sec	tion 119(e) of any United	d States provisional application(s) listed
		APPLICATION NUMBER	FILING DATE	
insofar as the subject matter manner provided by the first information as defined in Title	of each paragrap 37, Co	of the claims of this application of Title 35, United States	tion is not disclosed in th Code Section 112, I ack ction 1.56(a) which occu	States application(s) listed below and, ne prior United States application in the nowledge the duty to disclose material tred between the filing date of the prior
APPLICATION NUMBER		FILING DATE	STATUS (	patented/pending/abandoned)
······································				
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:  Customer Number 022879  Place Customer Number Bar Code				
			Label here	
Send Correspondence to: HEWLETT-PACKARD COMPANY			Direct Telepho	
Intellectual Property Adm P.O. Box 272400	inistratio	n	Matthew L. W	ade
Fort Collins, Colorado 80	527-240	0	(208) 396-520	63
made on information a with the knowledge to imprisonment, or both,	nd be hat wi under	lief are believed to be l Ilful false statements	true; and further the and the like so ma 18 of the United St	are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willfulnt issued thereon.
Full Name of Inventor:Cr	aig Wh	ite	Citizenship: U	S
Residence: 3403 S. Pasatiempo Place, Eagle, Idaho 83616				
Post Office Address: Sa	me as i	esidence	5/17/04	

Inventor's Signature Rev 10/03 (DecPwr)

(Use Page Two For Additional Inventor(s) Signature(s))

Page 1 of 2

Rev 10/03 (DecPwr)

DECLARATION AND P	OWER OF ATTORNEY ATION (continued)	ATTORNEY DOCKET NO. 200312527-1				
Full Name of joint inventor:	John Gomes	Citizenship: [N				
Residence:	620 SE 168th Ave. #N53, \	/ancouver, Washington 98684				
Post Office Address:	Same as residence					
John J. C. Lyon	21st May 2004					
Inventor's Signature		Date				
11-		· · · ·				
Full Name of joint inventor:		Citizenship:				
Residence:						
Post Office Address:						
	"-					
Invantor a Signature		Date				
	·	,				
Full Name of joint inventor:		Citizenship:				
Residence:						
Post Office Address:						
Inventor s Signature		Date				
Full Name of joint inventor:		Citizenship:				
Residence:						
Post Office Address:						
POSE OTHER AUGISSS:						
Inventor's Signature		Dete				
Full Name of joint Inventor:		Citizenship:				
Residence:						
Post Office Address:						
Inventor's Signature		Date				
		· · · · · · · · · · · · · · · · · · ·				
Full Name of joint inventor:		Citizenship:				
Residence:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of joint inventor:		Citizenship:				
Residence:						
Post Office Address:		·				
. Oof Attica wastess.						
Inventor's Signature	-	Date				

(Use Page Two For Additional Inventor(s) Signature(s))

Page 2 of 2